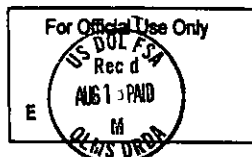


FORM LM-30

LABOR ORGANIZATION OFFICER AND EMPLOYEE REPORT

This report is mandatory under P L 86-257 as amended Failure to comply may result in criminal prosecution fines, or civil penalties as provided by 29 U S C 439 or 440



READ THE INSTRUCTIONS CAREFULLY BEFORE PREPARING THIS REPORT

1 File Number U <u>6819</u>	2 Fiscal Year Covered From <u>01</u> / <u>01</u> / <u>2004</u> Through <u>12</u> / <u>31</u> / <u>2004</u>
3 Name and address of person filing Name <u>Joseph J Nigro</u> P O Box Bldg Room No If any <u></u> Street <u>1750 New York Avenue, NW</u> City <u>Washington</u> State <u>DC</u> ZIP Code + 4 <u>20006-5386</u>	4 Name file number and address of labor organization Name <u>Sheet Metal Workers Intl Assoc</u> Labor Organization File Number <u>000-073</u> P O Box Building and Room Number If any <u>6th Floor</u> Street <u>1750 New York Avenue NW</u> City <u>Washington</u> State <u>DC</u> ZIP Code + 4 <u>20006 5386</u>
5 Position in labor organization <u>Assistant to the General President</u>	

Enter appropriate data below if during the past fiscal year you or your spouse or minor child directly or indirectly had any of the following interests (except as specified in the exclusions set forth in the instructions)

A. Held an interest in engaged in transactions (including loans) with or derived income or other economic benefit of monetary value from an employer whose employees your organization represents or is actively seeking to represent.

6 Name and address of Employer (including trade name if any) Name <u></u> Trade Name if any <u></u> P O Box Bldg Room No If any <u></u> Street <u></u> City <u></u> State <u></u> ZIP Code + 4 <u></u>	7.a Nature of Interest, Transaction or Income <u></u> 7.b Amount <u></u>
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Signature

15 Signature and verification The undersigned declares under penalty of Perjury and other applicable penalties of the law that all of the information submitted in this report (including the information contained in any accompanying documents) has been examined by the signatory and is to the best of the undersigned's knowledge and belief true correct, and complete (See the section on penalties in the instructions)

Signed

Joseph J Nigro

On

8-5-03
Date

Telephone Number

202-662 0813

Name of Person Filing

File Number U-

B Held an interest in or derived income or economic benefit with monetary value from a business (1) a substantial part of which consists of buying from, selling or leasing to or otherwise dealing with the business of an employer whose employees your labor organization represents or is actively seeking to represent, or (2) any part of which consists of buying from or selling or leasing directly or indirectly to, or otherwise dealing with your labor organization or with a trust in which your labor organization is interested.

8 Name and address of Business (including trade name if any)

Name MOSAIC

Trade Name if any

P O Box, Bldg., Room No if any

Street 4801 VIEWPOINT PLACECity CheverlyState MD ZIP Code + 4 20781

9 Business deals with:

- ☒ a. Labor Organization
☐ b. Trust
☐ c. Employer

10 If 9 b or 9 c is checked give trust or employer's name

Name

Trade Name if any

P O Box, Bldg Room No if any

Street

City

State ZIP Code + 4

11 a. Nature of such dealing

11.b Approximate dollar value of such dealing

12 a. Nature of interest held or income received

Dinner - Spouse included

12.b Amount

83.00

C Received from any employer (other than an employer covered under parts A and B above) or from any labor relations consultant to an employer any payment of money or other thing of value

13 a Name and address of Employer or Labor Relations Consultant (including trade name if any)

Name

Trade Name if any

P O Box, Bldg Room No if any

Street

City

State ZIP Code + 4

14.a. Nature of payment.

13 b Is the Business an Employer ☐ or Consultant ☐ ?

14.b Amount of payment.

Name of Person Filing

Joseph J Nigro

File Number U

B Held an interest in or derived income or economic benefit with monetary value from a business (1) a substantial part of which consists of buying from, selling or leasing to or otherwise dealing with the business of an employer whose employees your labor organization represents or is actively seeking to represent, or (2) any part of which consists of buying from or selling or leasing directly or indirectly to, or otherwise dealing with your labor organization or with a trust in which your labor organization is interested.

8 Name and address of Business (including trade name if any)

Name Trade Name if any P O Box, Bldg Room No if any Street City State ZIP Code + 4

9 Business deals with

☐ a. Labor Organization☐ b. Trust☐ c. Employer

10 If 9 b or 9 c is checked give trust or employer's name

Name Trade Name if any P O Box, Bldg Room No if any Street City State ZIP Code + 4

11 a. Nature of such dealing

11 b. Approximate dollar value of such dealing

12 a. Nature of interest held or income received

12.b Amount.

C Received from any employer (other than an employer covered under parts A and B above) or from any labor relations consultant to an employer any payment of money or other thing of value

13 a Name and address of Employer or Labor Relations Consultant (including trade name if any)

Name DALEY + GeorgeTrade Name if any P O Box, Bldg Room No if any Suite 400Street 20 South Clark StreetCity ChicagoState IL ZIP Code + 4 60603

14.a. Nature of payment.

Dinner cruise
including spouse

13 b Is the Business an Employer ☐ or Consultant ☐ ?

14.b Amount of payment.

\$ 354.00

B Held an interest in or derived income or economic benefit with monetary value from a business (1) a substantial part of which consists of buying from, selling or leasing to or otherwise dealing with the business of an employer whose employees your labor organization represents or is actively seeking to represent, or (2) any part of which consists of buying from or selling or leasing directly or indirectly to, or otherwise dealing with your labor organization or with a trust in which your labor organization is interested

8 Name and address of Business (including trade name if any)

Name Trade Name if any P O Box, Bldg Room No if any Street City State ZIP Code + 4

9 Business deals with:

☐ a. Labor Organization☐ b. Trust☐ c. Employer

10 If 9 b or 9 c. is checked give trust or employer's name

Name Trade Name if any P O Box, Bldg Room No if any Street City State ZIP Code + 4

11 a. Nature of such dealing

11.b Approximate dollar value of such dealing

12 a. Nature of interest held or income received

12.b Amount

C Received from any employer (other than an employer covered under parts A and B above) or from any labor relations consultant to an employer any payment of money or other thing of value

13 a Name and address of Employer or Labor Relations Consultant (including trade name if any)

Name MISEROW FINANCIALTrade Name if any P O Box, Bldg Room No if any Street 350 North Clark StreetCity ChicagoState IL ZIP Code + 4 60610

14.a. Nature of payment.

DINNER CRUISE
BRASS Telescope - (1) gift
(including spouse)

13 b Is the Business an Employer ☐ or Consultant ☐ ?

14.b Amount of payment.

\$431.00

Name of Person Filing

Joseph J Nigro

File Number U

B Held an interest in or derived income or economic benefit with monetary value from a business (1) a substantial part of which consists of buying from, selling or leasing to or otherwise dealing with the business of an employer whose employees your labor organization represents or is actively seeking to represent, or (2) any part of which consists of buying from or selling or leasing directly or indirectly to or otherwise dealing with your labor organization or with a trust in which your labor organization is interested

8 Name and address of Business (including trade name if any)

Name Amalgamated BankTrade Name if any P O Box, Bldg Room No if any Street ONE WEST MONROECity CHICAGOState IL ZIP Code + 4 60603

9 Business deals with

☒ a. Labor Organization☐ b. Trust☐ c. Employer

10 If 9 b or 9 c is checked give trust or employer's name

Name Trade Name if any P O Box, Bldg Room No if any Street City State ZIP Code + 4

11 a Nature of such dealing

Bank that offers
credit CARD to our
members

11 b Approximate dollar value of such dealing

12 a Nature of interest held or income received

Dinner / BASEBALL game
(including spouse)

12 b Amount.

\$208.00

C Received from any employer (other than an employer covered under parts A and B above) or from any labor relations consultant to an employer any payment of money or other thing of value

13 a Name and address of Employer or Labor Relations Consultant (including trade name if any)

Name Trade Name if any P O Box Bldg Room No if any Street City State ZIP Code + 4

14 a Nature of payment.

13 b Is the Business an Employer ☐ or Consultant ☐ ?

14 b Amount of payment.

B Held an interest in or derived income or economic benefit with monetary value from a business (1) a substantial part of which consists of buying from, selling or leasing to or otherwise dealing with the business of an employer whose employees your labor organization represents or is actively seeking to represent, or (2) any part of which consists of buying from or selling or leasing directly or indirectly to, or otherwise dealing with your labor organization or with a trust in which your labor organization is interested.

8 Name and address of Business (including trade name if any)

Name Weiss, Peck + GreerTrade Name if any P O Box, Bldg Room No if any 31st FloorStreet ONE NEW YORK PLAZACity NEW YORKState NY ZIP Code + 4 10004

9 Business deals with

☐ a. Labor Organization☒ b. Trust☐ c. Employer

10 If 9 b or 9 c. is checked give trust or employer's name

Name Smw Local Unions + CouncilTrade Name if any P O Box Bldg Room No if any Street 601 North Fairfax StCity AlexandriaState VA ZIP Code + 4 22314

11 a. Nature of such dealing

Investment Manager

11.b Approximate dollar value of such dealing

\$15,248

12 a Nature of interest held or income received

Dinner - including Spouse

12.b Amount.

\$250.00

C Received from any employer (other than an employer covered under parts A and B above) or from any labor relations consultant to an employer any payment of money or other thing of value

13 a Name and address of Employer or Labor Relations Consultant (including trade name if any)

Name Trade Name if any P O Box, Bldg Room No if any Street City State ZIP Code + 4

14.a. Nature of payment.

13 b Is the Business an Employer ☐ or Consultant ☐ ?

14.b Amount of payment.

Name of Person Filing

Joseph J Nigro

File Number U

B Held an interest in or derived income or economic benefit with monetary value from a business (1) a substantial part of which consists of buying from, selling or leasing to or otherwise dealing with the business of an employer whose employees your labor organization represents or is actively seeking to represent, or (2) any part of which consists of buying from or selling or leasing directly or indirectly to, or otherwise dealing with your labor organization or with a trust in which your labor organization is interested

8 Name and address of Business (including trade name if any)

Name The McLaughlin CompanyTrade Name if any P O Box, Bldg Room No if any Street 1725 DeSales Street NWCity Washington DcState ZIP Code + 4 20036

9 Business deals with

☒ a. Labor Organization☐ b. Trust☐ c. Employer

10 If 9 b. or 9 c. is checked give trust or employer's name

Name Trade Name if any P O Box, Bldg Room No if any Street City State ZIP Code + 4

11 a. Nature of such dealing

Insurance Agents

11.b Approximate dollar value of such dealing

\$717.00

12 a. Nature of interest held or income received

Poinsettia

12.b Amount

\$58.00

C Received from any employer (other than an employer covered under parts A and B above) or from any labor relations consultant to an employer any payment of money or other thing of value

13 a Name and address of Employer or Labor Relations Consultant (including trade name if any)

Name Trade Name if any P O Box, Bldg Room No if any Street City State ZIP Code + 4

14.a. Nature of payment.

13 b Is the Business an Employer ☐ or Consultant ☐ ?

14.b Amount of payment.

Name of Person Filing

Joseph J. Nigro

File Number U

B Held an interest in or derived income or economic benefit with monetary value from a business (1) a substantial part of which consists of buying from, selling or leasing to or otherwise dealing with the business of an employer whose employees your labor organization represents or is actively seeking to represent, or (2) any part of which consists of buying from or selling or leasing directly or indirectly to, or otherwise dealing with your labor organization or with a trust in which your labor organization is interested

8 Name and address of Business (including trade name if any)

Name Bank of New YorkTrade Name if any P O Box, Bldg Room No if any 12th FloorStreet ONE Wall StreetCity New YorkState NY ZIP Code + 4 10286

9 Business deals with

☐ a. Labor Organization☒ b. Trust☐ c. Employer

10 If 9 b or 9 c is checked give trust or employer's name

Name NATIONAL Pension FundTrade Name if any P O Box, Bldg Room No if any Street 601 North FAIRFAX StreetCity AlexandriaState VA ZIP Code + 4 22314

11 a. Nature of such dealing

Custodian For Investments

11.b Approximate dollar value of such dealing

236,312

12 a. Nature of interest held or income received

Dinner including Spouse

12.b Amount

\$218.00

C Received from any employer (other than an employer covered under parts A and B above) or from any labor relations consultant to an employer any payment of money or other thing of value

13 a Name and address of Employer or Labor Relations Consultant (including trade name if any)

Name Trade Name if any P O Box, Bldg Room No if any Street City State ZIP Code + 4

14.a. Nature of payment.

13 b Is the Business an Employer ☐ or Consultant ☐ ?

14.b Amount of payment.

Name of Person Filing

Joseph J N'gro

File Number U-

B Held an interest in or derived income or economic benefit with monetary value from a business (1) a substantial part of which consists of buying from, selling or leasing to or otherwise dealing with the business of an employer whose employees your labor organization represents or is actively seeking to represent, or (2) any part of which consists of buying from or selling or leasing directly or indirectly to, or otherwise dealing with your labor organization or with a trust in which your labor organization is interested

8 Name and address of Business (including trade name if any)

Name The Segal Company

Trade Name if any

P O Box, Bldg., Room No if any Suite 500Street 101 N Wacker DriveCity ChicagoState IL ZIP Code + 4 60606

9 Business deals with:

☐ a. Labor Organization☒ b. Trust☐ c. Employer

10 If 9 b or 9 c. is checked give trust or employer's name

Name SMW National Pension Fund

Trade Name if any

P O Box, Bldg. Room No if any

Street 601 N Fairfax StreetCity AlexandriaState VA ZIP Code + 4 22314

11 a. Nature of such dealing

Actuarial

11 b. Approximate dollar value of such dealing

242,489

12 a. Nature of interest held or income received

Dinner
including spouse

12.b Amount

\$206.00

C Received from any employer (other than an employer covered under parts A and B above) or from any labor relations consultant to an employer any payment of money or other thing of value

13 a Name and address of Employer or Labor Relations Consultant (including trade name if any)

Name

Trade Name if any

P O Box, Bldg. Room No if any

Street

City

State

ZIP Code + 4

14.a. Nature of payment.

13 b Is the Business an Employer ☐ or Consultant ☐ ?

14.b Amount of payment.

B Held an interest in or derived income or economic benefit with monetary value from a business (1) a substantial part of which consists of buying from, selling or leasing to or otherwise dealing with the business of an employer whose employees your labor organization represents or is actively seeking to represent, or (2) any part of which consists of buying from or selling or leasing directly or indirectly to, or otherwise dealing with your labor organization or with a trust in which your labor organization is interested.

8 Name and address of Business (including trade name if any)

Name Trade Name if any P O Box, Bldg Room No if any Street City State ZIP Code + 4

9 Business deals with:

☐ a. Labor Organization☐ b. Trust☐ c. Employer

10 If 9 b. or 9 c. is checked give trust or employer's name

Name Trade Name if any P O Box, Bldg Room No if any Street City State ZIP Code + 4

11 a. Nature of such dealing

11.b Approximate dollar value of such dealing

12 a. Nature of interest held or income received

12.b Amount.

C Received from any employer (other than an employer covered under parts A and B above) or from any labor relations consultant to an employer any payment of money or other thing of value

13 a Name and address of Employer or Labor Relations Consultant (including trade name if any)

Name Trade Name if any P O Box, Bldg Room No if any Street City State ZIP Code + 4

14.a. Nature of payment.

Fruit basket

13 b Is the Business an Employer ☐ or Consultant ☐ ?

14.b Amount of payment.

\$147.15